



**Cancer Treatment Plan and Budget**

Name of Organization/Entity applying for Grant: Your County Health Department

Patient Name: Jane Doe Date of Birth: 01/01/1943

Diagnosis: Post-menopausal bleeding, rule out endometrial cancer Date of Diagnosis: 02/07/2008

Comments: Has finding suggestive of endometrial cancer and needs to obtain a diagnosis

Treatment Plan from 02/2008 to 10/2008 Primary Treating Physician's Name: Dr. Dolittle  
 (date) (date)

<b>Procedure and Frequency of Treatment</b>	<b>Date Anticipated</b>	<b>Estimated Costs</b>	<b>Basis for costs (Medicaid rate, HSCRC-regulated rate, or MHIP rate)</b>
<i>Endometrial biopsy office</i>	<i>July 2008</i>	<i>119</i>	<i>Medicaid</i>
<i>Office visit x 2</i>	<i>July 2008</i>	<i>64</i>	<i>Medicaid</i>
<i>Tissue prep hospital</i>	<i>July 2008</i>	<i>127</i>	<i>HSCRC</i>
<i>Tissue interpretation</i>	<i>July 2008</i>	<i>30</i>	<i>Medicaid</i>
<i>Gyn oncology consult</i>	<i>August 2008</i>	<i>149</i>	<i>Medicaid</i>
<i>Colonoscopy pre op</i>	<i>August 2008</i>	<i>1300</i>	<i>HSCRC</i>
<i>Endoscopist for colonoscopy</i>	<i>August 2008</i>	<i>328</i>	<i>Medicaid</i>
<i>Pre op CT pelvis and abd</i>	<i>August 2008</i>	<i>1500</i>	<i>HSCRC</i>

<i>Rad reading of CT</i>	<i>August 2008</i>	<i>452</i>	<i>Medicaid</i>
<i>TAH, BSO w/lymph node dissection for surgeon and assistant</i>	<i>August 2008</i>	<i>3518</i>	<i>Medicaid</i>
<i>Diagnostic cysto intra-op</i>	<i>August 2008</i>	<i>317</i>	<i>Medicaid</i>
<i>Anesthesia</i>	<i>August 2008</i>	<i>200</i>	<i>Medicaid</i>
<i>Inpatient pharmacy</i>	<i>August 2008</i>	<i>500</i>	<i>HSCRC</i>
<i>Inpatient lab</i>	<i>August 2008</i>	<i>1000</i>	<i>HSCRC</i>
<i>Hospital room x 2 days</i>	<i>August 2008</i>	<i>2000</i>	<i>HSCRC</i>
<i>OR x 2 hours</i>	<i>August 2008</i>	<i>2000</i>	<i>HSCRC</i>
<i>Inpatient surgeon visit</i>	<i>August 2008</i>	<i>50</i>	<i>HSCRC</i>
<i>Outpatient pharmacy</i>	<i>August 2008-Feb 2009</i>	<i>1000</i>	<i>Medicaid</i>
<i>Outpatient lab</i>	<i>August 2008-Feb 2009</i>	<i>500</i>	<i>Medicaid</i>
<i>Outpatient Rad onc consult</i>	<i>Sept 2008</i>	<i>98</i>	<i>Medicaid</i>
<i>Radiation</i>	<i>Sept-Nov 2008</i>	<i>4598</i>	<i>Medicaid</i>
<i>Rad onc follow up</i>	<i>Jan 2009-Mar 2009</i>	<i>150</i>	<i>Medicaid</i>
<b>Sub Total for Treatment</b>		<b>20000</b>	
<b>Indirect costs</b> (Maximum of 7%)		<b>\$1400</b>	
<b>Total Requested</b> <b>(Treatment + Indirect)</b>		<b>\$21,400</b>	